

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA CAND 435 (CAND Rev. 08/2018)			TRANSCRIPT ORDER Please use one form per court reporter. <i>CJA counsel please use Form CJA24</i> Please read instructions on next page.						COURT USE ONLY DU^E DATE:							
1a. CONTACT PERSON FOR THIS ORDER Adrienne Zack			2a. CONTACT PHONE NUMBER (415) 436-7031			3. CONTACT EMAIL ADDRESS adrienne.zack@usdoj.gov										
1b. ATTORNEY NAME (if different)			2b. ATTORNEY PHONE NUMBER			3. ATTORNEY EMAIL ADDRESS										
4. MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE) US Attorney's Office 450 Golden Gate Ave., 9th Floor San Francisco, CA 94102			5. CASE NAME Centro Legal de la Raza v. EOIR						6. CASE NUMBER 3:21-cv-463-SI							
7. COURT REPORTER NAME (FOR FTR, LEAVE BLANK AND CHECK BOX)→ <input type="checkbox"/> FTR Marla Knox			8. THIS TRANSCRIPT ORDER IS FOR: <input type="checkbox"/> APPEAL <input type="checkbox"/> CRIMINAL <input type="checkbox"/> In forma pauperis (NOTE: Court order for transcripts must be attached) <input checked="" type="checkbox"/> NON-APPEAL <input checked="" type="checkbox"/> CIVIL CJA: <u>Do not use this form; use Form CJA24.</u>													
9. TRANSCRIPT(S) REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested), format(s) & quantity and delivery type:																
a. HEARING(S) (OR PORTIONS OF HEARINGS)			b. SELECT FORMAT(S) (NOTE: ECF access is included with purchase of PDF, text, paper or condensed.)					c. DELIVERY TYPE (Choose one per line)								
DATE	JUDGE (initials)	TYPE (e.g. CMC)	PORTION If requesting less than full hearing, specify portion (e.g. witness or time)		PDF (email)	TEXT/ASCII (email)	PAPER	CONDENSED (email)	ECF ACCESS (web)	ORDINARY (30-day)	14-Day	EXPEDITED (7-day)	3-DAY	DAILY (Next day)	HOURLY (2 hrs)	REALTIME
03/09/2021	SI	PI Hrg			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>					
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10. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC:																
ORDER & CERTIFICATION (11. & 12.) By signing below, I certify that I will pay all charges (deposit plus additional).										12. DATE						
11. SIGNATURE /s/ Adrienne Zack										03/11/2021						

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